REQUEST FOR APPROVAL TO LEASE SPACE

PROPOSAL TO NEGOTIATE (FOR 4,999 SQ. FT. OF USABLE SPACE AND UNDER) REQUEST MUST BE ACCOMPANIED BY A 1/4" OR 1/8" SCALE, FULLY DIMENSIONED FLOOR PLAN OF THE SPACE TO BE OCCUPIED. IF PLAN INCLUDES MORE THAN ONE AREA TO BE OCCUPIED, AREA OF OCCUPANCY MUST BE CLEARLY IDENTIFIED ON THE PLAN. EACH AREA/ROOM/OFFICE MUST BE CLEARLY MARKED WITH ITS INTENDED USE. THE FLOOR PLANS MUST ALSO DEPICT ALL PROPOSED CONDITIONS SUCH AS WALLS, WINDOWS, DOORS, MECHANICAL ROOMS, ELEVATORS, ENTRY WAYS AND EXITS. A DETAILED SITE PLAN MUST ALSO BE SUBMITTED WHICH WILL DEPICT THE PARKING AREA TO BE USED BY THE AGENCY AND MUST BE IN SUCH DETAIL AS TO INDICATE THE LAYOUT OF THE PARKING AREA, NUMBER OF PARKING SPACES, EXITS AND ENTRANCES INTO THE PARKING AREAS, PROPERTY LINES, RIGHTS-OF-WAY, SERVITUDES, SIDEWALKS AND BORDERING STREETS.

DEFINITIONS:

<u>USABLE SPACE:</u> Usable space is the floor area occupied by the Lessee <u>excluding</u> exterior walls, equipment rooms (mechanical, electrical, telephone, and other building system rooms), dedicated corridors, main lobbies, entrances, rest rooms, common space, stairwells, and elevators. The area is measured from the interior face of the exterior walls to the interior face of the wall defining the usable space. Usable space <u>does include</u> required internal circulation. (SEE ILLUSTRATIONS ATTACHED).

<u>OFFICE SPACE</u>: Office space is space required by the agency for use as offices, work stations, reception areas, conference rooms, storage, break areas, etc.

<u>INTERNAL CIRCULATION:</u> Internal circulation is any space used for circulation within the area designed for the agency such as corridors leading to offices and other spaces, pathways around desks or work stations, etc. <u>that would be used only by that agency.</u> (SEE ILLUSTRATIONS ATTACHED).

MAIL TO:

Division of Administration Facility Planning and Control Real Estate Leasing Section Post Office Box 94095 Baton Rouge, Louisiana 70804-9095

if applicable)

	CTIONS T	O BE PERFORMED OR SERVICES TO BE	E PROVIDED AT THE REQUESTED LEASED
1.	FROM:		
		(Department Name)	
		(Section and/or Unit N	(ame)
		(FACS Agency Number	<u></u>
		(Name and Title) (Address)	
		(City/State/Zip)	(Phone #)
3.	Current	address of office which will occupy the new s	pace:
		(Address)	
		(City/State/Zip)	(Phone #)
		(Current Lease Number,	(Expiration Date of Current

Lease, if applicable)

4.	Name and address of current lessor, if applicable:		
	(Name)		
	(Address)		
	(City/State/Zip)		
5.	If request is to vacate state-owned space, please ind sq ft	icate the number of square feet currently being o	ccupied: _
Reas	on present state-owned space is not satisfactory:		
	cating state-owned space to allow others to expand, what i mation as is available, i.e., who will occupy vacated space		de as much
	is possibility of occupying other or additional state-owneding contacts made and results of those contacts.	•	ation
6.	Date when occupancy of new leased space is requir	ed:	
7.	Name and address of proposed Lessor and Payee (i	f different from Lessor address:	
(Less	or's Company Name)	(Lessor/Payee's Name)	
(Indi	vidual Name, if applicable)	(Lessor/Payee's Address)	
(Less	or's Mailing Address)	(Lessor/Payee's City/State/Zip)	
(Less	or's City/State/Zip)	(Lessor's Phone #)	
8.	Complete address of requested rental location:		
	(Street Address)	(Year Constructed)	
	(City/State/Zip)		
Is an	y of the requested space located on the ground floor? Yes No		
	If "yes", please indicate on the floor plans, the areas lo	ocated on the ground floor if not already indicated.	
9. your	List below all locations considered indicating prices agency.	quotes and reasons each location was not accept	able to
PRO	E: Please submit with this request copies of all written POSAL LETTER FROM THE LESSOR OF THE SINUEST. THE PROPOSAL LETTER MUST INDICATION.	TE CHOSEN <u>MUST</u> BE SUBMITTED WITH T	
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1	0.	TEA	CT	TERN	TC.
	U.	I /H/A	5 E.	$\mathbf{H}_{\mathbf{K}}\mathbf{N}$	/15:

	The standard state lease terms are satisfactory, leavenin the need for the terms re	e the spaces be			tion to extend for five (5) a se are required, please indic	
	Primar	y term:	years	Option term:	years	
EXPL	LANATION:					
	The standard state lease factory, leave the spaces below terms requested:	•			and janitorial services. If the please indicate below and o	
EXPL	Utilitie	s: No		Janitorial:		
	TAL PAYMENTS: ed to by the agency for the r		te below, the pr	ice per month or the	e annual rent requested by	the lessor and
	\$	_ per month				
	LESSOR IS TO QUO	TE A MONTI	HLY RENTAI	AMOUNT		
COM	IMENTS:					
C. F	UNDING:% Fede	eral	% State	% S	Self Generated	
D.	Amount budgeted for re	ental of space re	equested: \$		per year	
E.	Total number of parking	g spaces require	ed:			
	emplo	yees	clients	state	vehicles	
11.	SPECIAL EQUIPME	NT:				
	any equipment which requirical outlets or requirements					detail (i.e. special
	HOURS OF OPERAT uilding must be heated and e explain below.				ndicating the hours of oper hour, five-day work week	
	Between the hours of	a.m.	and	p.m., day	ys per week,	
		_ through	(day)			
T	•					
Expla	anation:					

rage	4		
13.	RESTROOMS:		
	Number of employees:		
	Average number of clients per day, if applicable:		
Lesso client	or will be required to provide adequate restrooms to meet code requirements based on the number of employees and s.		
14. items	<u>COMMUNICATIONS REQUIREMENTS:</u> Questions concerning telephone service or other communications should be addressed to:		
	OFFICE OF TELECOMMUNICATIONS MANAGEMENT Customer Service Post Office Box 94280 Baton Rouge, Louisiana 70804-9280 Phone Number: 225/342-1000		
ALL	COMPLETED RL-2 FORMS ARE TO BE SUBMITTED TO OTM AT THE ADDRESS LISTED ABOVE		
A.	Number of telephone outlet locations (fax, modem, etc.):		
B.	Number of main answering station locations (Attendant Consoles):		
C.	Number of line monitoring locations (LSI's):		
D.	Number of lines monitored per LSI:		
E.	Number of telephone company data circuit outlet locations (56k, T-1, etc.):		
F.	Number of telephone company fire and/or security alarm circuits:		
G.	Number of paging microphone locations:		
H.	Number of paging loudspeaker locations:		
I.	Number of data terminal outlet locations (PC, printers, etc.):		

RL-2(A)

J.

K.

Number of special data device outlet locations (Blumberg, RS-232, etc.):

Number of TV outlet locations (CATV, CCTV, etc.):

Number of radio operator locations: ___

THE CABLE/WIRE SYSTEM SHALL CONSIST OF ONE OF THE FOLLOWING OPTIONS:

OPTION A: A duplex voice/data outlet with two (2) RJ45 jacks in a common faceplate, as required by the Lessee at designated workstations, and two (2), four (4)-pair, 24 AWG copper, UTP (Unshielded Twisted Pair) cables.

The jacks shall be as specified by the ANSI/EIA/TIA-568B, mounted and connected by an installer certified with such components. The jacks shall come with light-colored, plastic faceplates labeled "VOICE" (top) and "DATA" (bottom).

One cable shall be connected to the voice jack and shall be Category 3 minimum as specified by the ANSI/EIA/TIA-568B. The second cable shall be connected to the data jack and shall be Category/Level 7 as specified by the ANSI/EIA/TIA-568B, placed and connected by an installer certified with such wiring.

The other end of the cables shall be connected to terminal blocks mounted on the telephone backboard in the communications equipment/wiring room. The voice cable pairs shall be terminated on 66M1-50 terminal blocks. The data cable pairs shall be terminated on 110 type patch panels on a relay rack as specified by the ANSI/EIT/TIA-568B Category 5E mounted and connected by an installer certified with such components. Connections, color codes, and pair/pin numbers shall be as indicated in the Guideline Requirements, Specifications, and Wiring Diagrams.

COMMUNICATIONS REQUIREMENTS (continued):

OPTION B: Simplex voice and simplex data outlets with one (1) RJ11 (or RJ45) jack and one (1) RJ45 jack in separate faceplates, as required by the Lessee at designated workstations, wired with one (1), four (4)-pair (minimum), 24 AWG copper, UTP cable for voice and one (1), four (4)-pair, 24 AWG copper, UTP cable for data.

The voice jacks shall be standard modular telephone jacks. The voice jack faceplates shall be labeled "VOICE." The data jacks shall be Category 5E as specified by the ANSI/EIA/TIA-568B, mounted and connected by an installer certified with such components. The data jacks shall come with light-colored, plastic faceplates labeled "DATA."

One cable shall be connected to the voice jack and shall be specified by the ANSI/EIA/TIA-568B at a minimum of Category 3 performance. The second cable shall be connected to the data jack and shall be Category 5E as specified by the ANSI/EIA/TIA-568B, placed and connected by an installer certified with such wiring.

The other end of the cables shall be connected to terminal blocks mounted on the telephone backboard in the communications equipment/wiring room. The voice cable pairs shall be terminated on 66 type terminal blocks. The data cable pairs shall be terminated on 110 type patch panels in a relay rack as specified by the ANSI/EIA/TIA-568B Category 5E, mounted and connected by an installer certified with such components. Connections, color codes, and pair/pin numbers shall be as indicated in the Guideline Requirements, Specifications, and Wiring Diagrams.

CABLE/WIRE SYSTEM OPTION(S) SELECTED:
Telephone Equipment Room:7' x9' Equipped with: lighting, HVAC, power, plywood sheeted walls, grounding, etc. as outline in the OTM Guideline Requirements Document.
NOTE: THIS ROOM IS FOR COMMUNICATIONS ONLY! SLOP SINKS, ELECTRICAL PANELS, STORAGE, ETC. SHALL NOT BE ALLOWED IN THIS ROOM.
Incoming Telephone Service:50 pairs of wire minimum No. of Communication Outlet locations:2
<u>xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx</u>

15. TOTAL NUMBER OF OCCUPANTS TO BE HOUSED IN SPACE:

List all positions to be housed in the leased space. This list should include all currently filled positions as well as all funded vacant positions which are to be filled along with the expected date vacancy will be filled. If any of the positions listed are part-time positions which utilize the same space, but at different times, please indicate this next to the employee's name. (i.e. A small clinic may have five (5) doctors, each spending only one day per week at the clinic, each on a different day of the week, and each using the same examining room on his work day. In a situation such as this, indicate each position individually, but list the same room number for each position, and note next to the employee's name that it is a part-time position).

Indicate which of the requested areas each employee will be assigned, using the letter designation (Section 16) of the usable space area and the number assigned to the <u>requested</u> room. (i.e. For an employee assigned to the <u>Reception/Waiting</u> Area(s), the "Room Assigned" would be B.2.a., b., or c.).

CIVIL SERVICE TITLE	EMPLOYEE NAME OR "VACANT"	ROOM <u>ASSIGNED</u>

16. SPACE REQUIREMENTS:

LIST THE TYPE OF ROOMS, SQUARE FEET, AND OTHER INFORMATION AS INDICATED BASED ON THE SPACE ENTITLEMENTS. IF YOU BELIEVE THE REQUIREMENT OF A PARTICULAR SPACE EXCEEDS THE SPACE ENTITLEMENT, SUBMIT JUSTIFICATION FOR THIS ADDITIONAL SPACE.

INTERNAL CIRCULATION: TOTAL USABLE AREA REQUESTED: Sq ft COMMON FUNCTION REQUIREMENTS: Total sq ft Kitchen: Equipped with work counter ft. long, with upper and lower cabinets, drawers, and a standard kitchen sink with hot and cold running water, space for full-sized refrigerator, and two (2) 110 volt dedicated outlets for the refrigerator and microwave oven owned by the Lessee. Reception/Waiting Area(s) a. Waiting Area sq ft Average number of people to use this area per day: Average number of people to use this area at any one time: b. Reception Area sq ft Number of employees and Civil Service Title(s) to be housed in this area: Conference Room(s) a. room(s) @ sq ft = total sq ft Average number of people to use this room per day: Average number of people to use this room per day: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room per day: Average number of people to use this room per day: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number o	ED: sq ft	OTAL AMOUNT OF SPACE REQU Total of B., C., and D.)
COMMON FUNCTION REQUIREMENTS: Total sq ft	sq ft	NTERNAL CIRCULATION:
Kitchen:	sq ft	OTAL USABLE AREA REQUESTE
Equipped with work counterft. long, with upper and lower cabinets, drawers, and a standard kitchen sink with hot and cold running water, space for full-sized refrigerator, and two (2) 110 volt dedicated outlets for the refrigerator and microwave oven owned by the Lessee. Reception/Waiting Area(s) Sq ft A. Waiting Area sq ft Average number of people to use this area at any one time:	: Total sq ft	COMMON FUNCTION REQUIREM
a. Waiting Areasq ft Average number of people to use this area per day: Average number of people to use this area at any one time: b. Reception Areasq ft Number of employees and Civil Service Title(s) to be housed in this area: Conference Room(s) Total sq ft a room(s) @ sq ft = total sq ft Average number of people to use this room per day: Average number of people to use this room at any one time: How often will this room be used to its fullest capacity? b room(s) @ sq ft = total sq ft Average number of people to use this room at any one time: Average number of people to use this room will be used: How often will this room be used to its fullest capacity? Storage number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this room at any one time: Average number of people to use this r	ng, with upper and lower cabinets, and cold running water, space for	quipped with work counter
Average number of people to use this area at any one time:	Total sq ft	eception/Waiting Area(s)
Average number of people to use this area at any one time:	sq ft	. Waiting Area
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Comments:	area(s) as well as approximate sizes. Also, list any special equipment	
	total sq ft	room(s) @ sq ft =
b. room(s) @ sq ft = total sq ft		comments:
b. room(s) @ sq ft = total sq ft		
	total sq ft	room(s) @ sq ft =
Comments:		omments:

File Room(s)

5.

${\bf COMMON\,FUNCTION\,REQUIREMENTS\,(continued):}$

a	room(s) @	sq ft =	total sq ft	
		_	<u> </u>	
b	room(s) @	sq ft =	total sq ft	
Comme	ents:			
Other:				Total sq ft
List und	der Comments t	the purpose of thes	se areas as well as any special	equipment to be used in this area
a	room(s) @	sq ft =	total sq ft	
Comme	ents:			
b	room(s) @ _	sq ft =	total sq ft	
Comme	ents:			
			total sq ft	
с	room(s) @	sq ft =		
c	room(s) @	sq ft =	total sq ft	
c	room(s) @ _ ents:	sq ft =	total sq ft	Total sq ft
cComme	room(s) @ _ ents:	sq ft = AREA REQUIR	total sq ft	
CCommo	room(s) @ ents: NISTRATIVE offices @	sq ft = AREA REQUIR sq ft =	total sq ft REMENTS:	
Comme ADMI 1 2	room(s) @ _ ents: NISTRATIVE offices @ offices @	sq ft = AREA REQUIR sq ft = sq ft =	total sq ft REMENTS: total sq ft	
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Comme ADMI 1 2 4 5 6 7 8 10 111	room(s) @ _ ents: NISTRATIVEoffices @offices @	sq ft =	total sq ft total sq ft	

_____ Total sq ft

D.	AREAS OF SPECIALIZED FUNCTIONS:	Total sq ft
		ter rooms, laboratories, drafting rooms, radio equipment rooms, antenna features and/or structural requirements which the Lessor should provide
	1. room(s) @ sq ft =	total sq ft
Type o	of Space and Requirements needed:	
	2 room(s) @ sq ft =	total sq ft
Type o		
	3 room(s) @ sq ft =	total sq ft
Type	of Space and Requirements needed:	
	4. room(s) @ sq ft =	total sq ft
Type	of Space and Requirements needed:	
17.	ADDITIONAL COMMENTS/EXPLANAT	TONS:
form.	When using this sheet, please indicate the item n	omments or explanations you may feel necessary for any item on this number which corresponds to the section you are continuing. (i.e., For idicate 9.D as the Item Number.) Attach additional pages if necessary.
Item N	Number Comments/Explanations	
		people indicated below. Their signature certifies that sufficient the rental obligations as listed in Item Number 10.B.for the
SIGN	ED:	pace) DATE:
	(Person in charge of occupying the sp	pace)
I certi	ify that funds are available for the rental of off	fice space at the above location for the listed annual rent.
SIGN	ED:	DATE:
I conc	cur with this space request.	
SIGN	ED:	Department)
	(Person authorized to sign leases for	Department)